PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10632463

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE		OR I		
			5/					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			3/ minus 20=		*			X\$ 9=		OR	X\$18=	198
INDEPENDENT CLAIMS				nus 3 =	*2		i	X42=		OR	X84=	(68)
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	·				+140=	-	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							,	TOTAL	,	OR	TOTAL	1176
CLAIMS AS AMENDED - PART II								'			OTHER	THAN
		(Column 1)		(Column 2) (Column 3)				SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING		HIGH NUM		PRESENT		Marie Company	_ADDI			ADDI-
		AFTER AMENDMENT		PREVIO PAID	OUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- CI AIIA	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM			+140=		OR	+280=	1
										OR	TOTAL	
		(Column 1)		ADDIT. FEE	<u> </u>	1	ADDIT. FEE					
		CLAIMS		HIGH	mn 2)_ HEST	(Column 3)	7 1		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=	-	OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
<u> </u>							•					
AMENDMENT C		CLAIMS REMAINING			HEST IBER	PRESENT			ADDI-	1		ADDI-
		AFTER AMENDMENT		PREVI	OUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
¥	Independent	*	Minus	***]=	↓	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
	If the entry in any	ımp 1 io loog thes t	iho ontri in cali	uma O well	a "O" in a-	luma 2		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE											
		mber Previously Pa					er fo	und in the ap	propriate bo	x in co	olumn 1.	